FORM D

Name of Offering

UNITED STATES SEC Mail Processing SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D MAY 28 2008

NOTICE OF SALE OF SECURITIES

PURSUANT TO REGULATION SECTION 4(6), AND/OR 110

UNIFORM LIMITED OFFERING EXEMPTION

(C) check if this is an amendment and name has changed, and indicate change.)

OMB AP	PROVAL
OMB Number:	
Expires: Estimated average	
hours per form	16.00
SEC US	E ONLY
Prefix	Serial
1	1
DATE RI	CEIVED
I	1

Filing Under (Check box(es) that apply): Type of Filing: New Filing	☐ Rule 504 ☐ Amendment	☐ Rule 505	Rule 506	☐ Section 4(6)	ULOE	1
	A. BASI	CIDENTIFICAT	ION DATA			
Enter the information requested about	he issuer					
Name of Issuer	amendment and name h	as changed, and ir	idicate change.	1 111111 1 1231)8047859	
Address of Executive Offices: c/o Morgan Keegan Fund Management, In	nc., 50 North Front Stre		et, City, State, Zip Co	ode) Telephone N	lumber (Including Area Cod (800) 366.7426	e)
Address of Principal Offices (if different from Executive Offices)		(Number and Stre	et, City, State, Zip Co	ode) Telephone N	lumber (Including Area Cod	e)
Brief Description of Business: Private	Investment Company				PROCESSE	Đ
Type of Business Organization □ corporation	☐ limited p	partnership, already	formed	☑ other (please s	pecify) JUN 032008	
□ business trust	☐ limited p	partnership, to be fo	ormed	Limited Liability Co	PROMSON REU	IED
Actual or Estimated Date of Incorporation or Jurisdiction of Incorporation or Organization	_	Month 1 2 Postal Service Abbr	Yea 0 reviation for State;	1 🛛 🖾 Ad		r er t
·· ·· · · · · · · · · · · · · · · · ·			or other foreign jurisc	liction)	E	

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

		A. BASIC ID	ENTIFICATION DATA	A	
 Each beneficial owr Each executive office 	e issuer, if the iss er having the pov er and director of	suer has been organized wit wer to vote or dispose, or di		f, 10% or more of ing partners of par	a class of equity securities of the issuer; thership issuers; and
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, i	f individual): Mo	organ Keegan Fund Manag	gement, Inc.		
Business or Residence Addi	ess (Number and	Street, City, State, Zip Coo	le): 50 North Front Street,	Memphis, TN 38	103
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner		☐ Director	General and/or Managing Partner
Full Name (Last name first, i	f individual):	McQuiston, Thomas J.			
Business or Residence Add	ress (Number and	Street, City, State, Zip Coo	te): 50 North Front Street,	Memphis, TN 38	103
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner		☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, i	f individual): \	Weller, Joseph C.			
Business or Residence Add	ress (Number and	Street, City, State, Zip Coo	le): 50 North Front Street,	Memphis, TN 38	103
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner		Director	☐ General and/or Managing Partner
Full Name (Last name first, i	f individual):	Maxell, Charles D.			
Business or Residence Add	ress (Number and	Street, City, State, Zip Coo	de): 50 North Front Street,	Memphis, TN 38	103
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first, i	f individual):				
Business or Residence Add	ress (Number and	1 Street, City, State, Zip Coo	de):		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, i	f individual):				
Business or Residence Add	ress (Number and	Street, City, State, Zip Coo	de):		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual):				
Business or Residence Add	ress (Number and	d Street, City, State, Zip Coo	de):		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first,	f individual):				
Business or Residence Add	ress (Number and	Street, City, State, Zip Coo	le):		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

					В.	INFORM	IATION	ABOUT	OFFER	ING			
1.	Has the issu	er sold, or (does the is	suer intend	d to sell, to Answer a	non-accre	edited inve	estors in th lumn 2, if f	is offering iling under	? ULOE.		☐ Yes	⊠ No
2.	. What is the minimum investment that will be accepted from any individual?										\$20	00,000*	
											* May b	e waived	
3.	Does the off	erina permi	t joint own	ership of a	single uni	t?					******	⊠ Yes	i □ No
4.	any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.									y, s in the SEC d are			
Full	Name (Last r	ame first, i	findividual)									
Bus	ness or Resi	dence Addr	ess (Numb	er and Str	eet, City, S	State, Zip (Code) 50	North Fro	ont Street,	Morgan I	Keegan To	ower, Mem	phis, TN 38103
Nan	e of Associa	ed Broker	or Dealer	Morga	an Keegar	& Comp	any, Inc.						
Stat	es in Which f												
	(Check "All : AL) [AK		heck indivi [AR]		•					☐ [GA]		☐ [ID]	
		☐ [IA]	☐ [KS]		□ [LA]			☐ [MA]			☐ [MS]		
					□ [NM]				☐ [OH]		☐ [OR]		
		 □ [SD]						□ [WA]			□ [WY]		
Full	Name (Last r	ame first, i	findividual)									
Bus	ness or Resi	dence Addr	ess (Numb	per and Str	eet, City,	State, Zip	Code)						
Nan	e of Associa	ed Broker	or Dealer				,					• • •	
Stat	es in Which F (Check "All !												☐ All States
	`	☐ [AZ]			•					☐ [GA]	[HI]	☐ [ID]	— / *
	L] 🔲 [IN]	□ [iA]	□ [KS]	□ [KY]	☐ [LA]	☐ [ME]	☐ [MD]	☐ [MA]	[MI]	☐ [MN]	☐ [MS]	[MO]	
	MT] [NE		□ [NH]	□ [NJ]	□ [NM]	□ [NY]	□ [NC]	[ND]	□ [OH]	□ [OK]	[○R]	□ [PA]	
	RI] 🔲 [SC	🔲 [SD]	□ [TN]	□ [TX]	[UT]	□ [VT]	☐ [VA]	□ [WA]			□ [WY]	☐ [PR]	
Full	Name (Last r	ame first, i	findividual)						•			
Bus	ness or Resi	dence Addr	ess (Numb	er and Str	eet, City, S	State, Zip	Code)						
Nan	e of Associa	ed Broker	or Dealer										
Stat	es in Which f (Check "All :												☐ All States
	AL] 🔲 (AK	☐ [AZ]	☐ [AR]	CA]	☐ [CO]	□ (CT)	□ [DE]		□ [FL]	☐ [GA]	[HI]	[ID]	
□ (L] 🔲 [IN]	☐ [IA]	☐ [KS]	□ [KY]	☐ [LA]	☐ [ME]	☐ (MD)	☐ [MA]	☐ [MI]	☐ [MN]		[MO]	
	NT] [NE		□ [NH]	□ [NJ]	□ [NM]	□ [NY]	☐ [NC]	□ [ND]	□ [OH]	□ [OK]	□ [OR]	□ [PA]	
	RII □ rsc	I ∏ (SD)	□ mn	Пπхі	□ ruπ	□ıvn	□ (VA)	□ IWAI		□ mii	□ IWYI	□ (PR)	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.				
	Type of Security	•	Aggregate Offering Price		Amount Already Sold
	Debt	. \$	0	\$	0
	Equity	. \$	0	\$	0_
	□ Common □ Preferred				
	Convertible Securities (including warrants)	. <u>\$</u>	0	\$	0
	Partnership Interests	. <u>\$</u>	0	\$	
	Other (Specify) Beneficial Interests	\$	100,000,000	\$_	19,837,308
	Total	\$	100,000,000	\$	19,837,308
2.	Answer also in Appendix, Column 3, if filing under ULOE Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."				
			Number Investors		Aggregate Dollar Amount of Purchases
	Accredited Investors	. <u></u>	63	\$	19,837,308
	Non-accredited Investors		0	\$	0
	Total (for filings under Rule 504 only)		0	\$	0
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1. Type of Offering		Types of Security		Dollar Amount Sold
	Rule 505			\$	n/a
	Regulation A			\$	n/a
	Rule 504		n/a	\$	n/a
	Total		n/a	s	n/a
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.			<u>*</u>	
	Transfer Agent's Fees	••••••	🗆	\$	0
	Printing and Engraving Costs	••••••	🗆	\$	0
	Legal Fees		🛛	\$	154,742
	Accounting Fees	•••••	🗆	\$	0
	Engineering Fees	•••••	🗆	\$. 0
	Sales Commissions (specify finders' fees separately)	•••••	🗆	\$	0
	Other Expenses (identify)	• • • • • • • • • • • • • • • • • • • •	🗆	\$	0
	Total	**********	🛛	\$	154,742

4	 Enter the difference between the aggregate off Question 1 and total expenses furnished in respons "adjusted gross proceeds to the issuer." 	ifference is the		<u>\$</u>	99,845,258	
5	Indicate below the amount of the adjusted gross proused for each of the purposes shown. If the amount estimate and check the box to the left of the estimate the adjusted gross proceeds to the issuer set forth it	t for any purpose is not known, fure. The total of the payments liste	imish an ed must equal	Payments to Officers, Directors & Affiliates		Payments to Others
	Salaries and fees		🗆	\$	□	\$
	Purchase of real estate		🗆	\$	_ □	\$
	Purchase, rental or leasing and installation of	of machinery and equipment	🖸	\$	_ □	\$
	Construction or leasing of plant buildings an	d facilities	🗖	\$	_ □	\$
	Acquisition of other businesses (including the offering that may be used in exchange for the pursuant to a merger	ne assets or securities of another	issuer	\$	_ 0	\$
	Repayment of indebtedness		🔲	\$	_ 0	\$
	Working capital		🗆	\$	🛛	\$ 99,845,258
	Other (specify):		_ 🗆	\$	_ □	\$
				\$	_ □	\$
	Column Totals		🗆	\$	⊠ • 99,84	\$ 99,845,258
	Total payments Listed (column totals added)		\S	\$ 33,04	
*****		D. FEDERAL SIGNA	ATURE		,	
co	his issuer has duly caused this notice to be signed by institutes an undertaking by the issuer to furnish to the issuer to any non-accredited investor pursuant to	e U.S. Securities and Exchange (person. If this Commission, up	notice is filed under Report written request of i	ule 505, the	e following signature e information furnished
iss	suer (Print or Type)	Signature	19	-/	Date	
Pr	referred Fund of Funds LLC	Conse	Mod.	Sawolan	May 27	2008
	ame of Signer (Print or Type) nomas J. McQuiston	Title of Signer (Print of Ty President of Morgan Ke	,	nagement, Inc., its M	anaging N	lember

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

		E. STATE SIGNATURE						
1.	Is any party described in 17 CFR 230.262 presprovisions of such rule?	ently subject to any of the disqualification ☐ Yes ☑ No						
	See A	Appendix, Column 5, for state response.						
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.							
3.	The undersigned issuer hereby undertakes to f	urnish to the state administrators, upon written request, information furnished by the issuer to offerees.						
4.	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.							
	uer has read this notification and knows the conte led person.	ents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly						
,	Print or Type) ed Fund of Funds LLC	Signature Date May 27, 2008						
Name o	f Signer (Print or Type)	Title of Signer (Print or Type):						
Thomas	s J. McQuiston	President of Morgan Keegan Fund Management, Inc., its Managing Member						

Instruction:

Thomas J. McQuiston

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

				АР	PENDIX					
1	4	2	3			5				
	Intend to sell to non-accredited investors in State (Part B – Item 1)		Type of security and aggregate offering price offered in state (Part C – Item 1)		under Sta (if yes, explana waiver g	Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E – Item 1)				
State	Yes	No	Beneficial Interests	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
AL										
AK										
AZ										
AR										
CA										
co										
СТ										
DE		Х	Beneficial Interests	1	\$1,578,000	0	\$0		х	
DC		Х	Beneficial Interests	1	\$297,000	0	\$0		Х	
FL		Х	Beneficial Interests	12	\$2,778,000	0	\$0		х	
GA		х	Beneficial Interests	6	\$1,571,000	0	\$0		х	
н										
ID										
IL										
IN										
IA										
KS			-							
KY		х	Beneficial Interests	3	\$537,720	0	\$0		х	
LA		х	Beneficial Interests	1	\$202,000	0	\$0		х	
ME				· ·						
MD		Х	Beneficial Interests	1	\$200,000	0	\$0		х	
MA										
Mi										
MN										
MS		х	Beneficial Interests	1	\$200,000	0	\$0		х	
МО										
мт										
NE		х	Beneficial Interests	1	\$100,000	0	\$0		х	
NV										
NH										
NJ										

				AP	PENDIX				
1	2	2	3		5 Disqualification				
	to non-a	to sell ccredited s in State - Item 1)	Type of security and aggregate offering price offered in state (Part C – Item 1)		Type of investor and Amount purchased in State (Part C – Item 2)				attach attach ation of granted) - Item 1)
State	Yes No		Beneficial Interests	Number of Accredited Investors	Number of Non-Accredited Investors		Amount	Yes	No
NM									
NY		х	Beneficial Interests	2	\$1,270,114	0	\$0		×
NC		х	Beneficial Interests	9	\$3,897,100	0	\$0		x
ND									
ОН									
ок									
OR									
PA									
RI									
sc		Х	Beneficial Interests	1	\$200,000	0	\$0		х
SD									
TN		Х	Beneficial Interests	18	\$4,434,988	0	\$0		Х
TX		Х	Beneficial Interests	1	\$200,000	0	\$0		х
UT									
VT									
VA									
WA									
wv		х	Beneficial Interests	2	\$1,646,011	0	\$0		х
WI									
WY									
Non							- · · · · · · · · · · · · · · · · · · ·		

